

# CY 2004 Municipal Recycling Data Sheet

**Return to:**  
**Amy Roth**  
**Department of Environmental Protection (DEP)**  
**Bureau of Waste Prevention—8<sup>th</sup> Floor**  
**One Winter Street Boston, MA 02108**  
**FAX: 617-292-5858**  
**EMAIL: Amy.Roth@state.ma.us**

For Calendar year ending December 31, 2004

**Return one (1) signed original copy  
and please keep a copy for your records.**

DEP has pre-printed - using this typeface - each community's municipal contact information in Section 1, and the name(s) of its contracted solid waste and recycling hauler and household information in Section 3. Please correct any inaccuracies.

## Section 1 – Municipal Contact Information

According to the most recent records received by DEP, the information printed below regarding your municipal contact and program is accurate. *Please correct any information where necessary.*

Recycling Program

Contact:

Title:

Address:

Phone:

Fax:

Population Estimate:




Primary Solid Waste  
Collection Method:

E-Mail Address:

Primary Recycling  
Collection Method:

## Section 2 – Tons of Residential Municipal Solid Waste Disposed

- DEP defines “residential MSW” as all trash generated from single family and multi-family homes, condominiums, and apartment buildings of all sizes, whether municipally or privately served.
- Indicate where your municipality, or its contractor, disposes of its **residential** municipal solid waste (MSW), your contract end date (if applicable), and the tonnage of residential MSW disposed of at each facility.
- If your residential MSW goes to a transfer station, enter the name of the final disposal location (if you have a long-term contract with a landfill or combustion facility) in addition to the name of the transfer station and tonnage disposed.

Disposal Site/Transfer Station		Contract End Date (if any)	Tons Disposed
<b>Landfill</b>			<b>TONS</b>
<b>Combustion</b>			<b>TONS</b>
Bulky Waste Disposal	IF your municipality collects bulky waste for disposal that <b>IS NOT</b> included in the landfill or combustion tonnage number reported above, enter that number in the column at right: 		Enter bulky waste tons:
Commercial Disposal	IF your municipality collects MSW from commercial sources, (i.e. non-residential) that is <b>INCLUDED</b> in the landfill or combustion tonnage number reported above, enter that number in the column at right:  		Enter commercial tons:
<b>TOTAL DISPOSAL</b> = (landfill + combustion + bulky) - <b>MINUS</b> (commercial)			<b>TOTAL TONS</b>

### Section 3 - Residential Solid Waste and Recycling Services

Enter information below for **every service provided to residents** by your municipality OR by private haulers in your community. See Data Sheet Instructions - Section 3 for a definition of municipal vs. private subscription hauler service.

Break-out the MSW disposal tonnage reported in Section 2 (on the previous page) into each applicable service category below and record the number of households that are currently **served** by that method. For examples on completing this section, please refer to the instructions. Please note that if the tonnage from private haulers is unknown, DEP will estimate that tonnage based on the number of households subscribing to private haulers and the tonnage that is known and reported in other categories.

Type of Service		Municipality Operates (municipal employees collect at curb)	Municipality Contracts With Hauler for Curbside Collection	Residents Use Drop-off Center	Residents Subscribe w/ Private Hauler	TOTAL HOUSEHOLDS SERVED
DISPOSAL	Households Served					
	Tonnage Collected					
RECYCLING	Households Served					
COMPOST	Households Served					
DEP records show that the <u>TOTAL number</u> of households in your municipality is →						
If applicable, please enter the name of your contracted <u>waste</u> hauler(s):						Contract End Date(s):
If applicable, please enter the name of your contracted <u>recycling</u> hauler(s):						Contract End Date(s):

### Section 4 - Municipal Solid Waste and Recycling Services Provided to Businesses

Only include programs that your municipality operates, funds or coordinates. If DEP already has information on your program, that information has been pre-printed. Please review and correct it or add to it as necessary. For examples on completing this section, please refer to the instructions.

	Type of Business Recycling Program	If type pre-printed is not accurate, please correct and check all that apply:	Total # of Businesses Participating in Municipal Program
<b>RECYCLING</b>		<input type="checkbox"/> Curbside (muni operated or contracted) <input type="checkbox"/> Drop-off <input type="checkbox"/> Hauler Agreement (e.g., muni coordinates service agreement or terms on behalf of businesses) <input type="checkbox"/> Other _____	
<b>TRASH</b>		<input type="checkbox"/> Curbside (muni operated or contracted) <input type="checkbox"/> Drop-off <input type="checkbox"/> Hauler Agreement (e.g., muni coordinates service agreement or terms on behalf of businesses) <input type="checkbox"/> Other _____	
<b>Does your municipality have a mandatory business recycling ordinance?</b> _____ YES                      _____ NO		<b>Does your municipality require haulers to provide recycling services through permit requirements?</b> _____ YES                      _____ NO	

## Section 5 - Costs of Residential Solid Waste Services

Please do not report other MSW costs associated with disposal, such as collection fees, hauling and transportation costs.

If you pay a per ton **disposal** tip fee, please indicate that amount here. Do include change in law costs if applicable. \$ \_\_\_\_\_ per ton

Check here if you do **NOT** pay a per ton disposal tip fee: ☐ Comments on Fees: \_\_\_\_\_

**How does your municipality charge its residents for its solid waste program costs? Please check all that apply.**

Included in tax base? ☐ Separate flat fee? ☐ Amount charged: \$ \_\_\_\_\_ per year. Pay-As-You-Throw ☐

If our records indicate that you are a Pay As You Throw (PAYT) community, an additional page has been added to the end of the survey so that we may be sure our database information is current. If you are a PAYT community and no survey has been included, please call Amy Roth at (617) 292-5634 and one will be faxed to you. If your community does not have PAYT, but you are interested in learning more about it, please indicate the name and phone number of the person whom we should contact: \_\_\_\_\_

## Section 6 – Municipal Waste Diversion Program Results

Please provide the amount of each material the municipality and private subscription haulers diverted through recycling, composting, and hazardous household product collection programs. **Use the units provided for each material.** If necessary, use the enclosed table of conversions to enter all numbers in the units indicated. In column marked “% Comm” estimate what percentage of reported tonnage collected through municipal program (i.e. municipally operated or contracted) was from *commercial* sources in 2004.

**General Recyclables:** PLEASE NOTE: 2003 TONNAGES HAVE BEEN PRE-PRINTED FOR REFERENCE.

Material	2004 Tons	2003 Tons	% Comm	Comments
Newspaper				Estimate what percentage was from <i>Commercial</i> sources, if possible.
Cardboard				Estimate what percentage was from <i>Commercial</i> sources, if possible.
Mixed Paper				If separate amounts not known, include ONP, OCC, magazines, office paper, junk mail, etc.
Commingled Containers				Use this if containers are collected together (i.e. separate material tonnage amounts not known).
Steel/Tin cans				Steel containers and tin cans. Scrap steel should be reported below in scrap metal.
Aluminum				Collected for recycling only, note redemption center tonnage separately below.
Glass (all colors)				Collected for recycling only, note redemption center tonnage separately below.
ALL Plastics				Collected for recycling only, note redemption center tonnage separately below.
Scrap Metal/White Goods				Includes appliances and other residential scrap metal; estimate % from commercial sources
Textiles/Used Clothing				Please indicate who collects: _____
Swap Shop				Estimate tonnage of materials exchanged for reuse in designated swap shop.
Other Residential Material				Please describe: _____. Note: If no description provided, material will not be counted towards recycling rate.
Containers (redemption)				Collected for redemption by municipality or charity group at a municipal recycling center. Do not include tonnage from redemption centers.

### Compostables/Organics:

Leaves/Yard Waste			Enter Leaves/Yard Waste in <b>TONS</b> only. Conversion factors available in instructions. <b>Residential Material Only.</b>	
Christmas Trees			<input type="checkbox"/> Number <input type="checkbox"/> Tons	Enter as number of trees or tons of trees chipped, ground, shredded or composted. Please specify which you are reporting.
Our records indicate that the TOTAL number of compost bins EVER distributed by your city or town as of December 31, 2003 is				How many have you distributed since 12/31/03? _____
Does your community educate residents about and enforce a policy, bylaw, or ordinance excluding the collection of leaves and yard waste from the solid waste disposal program?				YES <input type="checkbox"/> NO <input type="checkbox"/>
Does your community have a combination of weekly drop-off and/or curbside collection for leaves and yard waste available to residents from March through November?				YES <input type="checkbox"/> NO <input type="checkbox"/>
Does your community have a mandatory residential recycling ordinance?				YES <input type="checkbox"/> NO <input type="checkbox"/>

**Residential Hazardous Household Products (HHP) and Difficult-to-Manage-Wastes (DTMW)**

**PART A: Reporting in Part A and Part B are mutually exclusive.** Please report the number of comprehensive events your municipality sponsored or participated in 2004. To avoid double counting, please do **not** report tonnage collected in one day events below in Part B.

Total number of comprehensive HHP events in 2004: \_\_\_\_\_

Were these events: ☐ reciprocal ☐ regional☐ open ☐ other \_\_\_\_\_

Approximate total number of full cars served at comprehensive HHP events in 2004: \_\_\_\_\_

Approximate total number of ½ cars served at comprehensive HHP events in 2004: \_\_\_\_\_

**PART B:** If your municipality has ongoing material-specific collections **in addition** to the events reported above in Part A, please report that tonnage collected below.

PLEASE NOTE: Providing the amount(s) for these materials is OPTIONAL. If a city or town does not have these figures to report they will not be included in the calculation of the municipal recycling rate. Report the number of days you collected these items, or days open to residents. Please make note of the units requested.

MATERIAL	AMOUNT	UNITS	# OF COLLECTION DAYS in 2004
Auto batteries		Number	
Auto tires		<input type="checkbox"/> Number <input type="checkbox"/> Tons	
Batteries – household		5-gallon pails	
CRTs/ Electronics		Pounds	
Fluorescent lamps and bulbs		Linear feet	
Propane tanks		Number	
Anti-freeze		55-gallon drums	
Used oil filters		55-gallon drums	
Latex/oil based paint		Cubic yard boxes	
Waste/used engine oil		Gallons	
Elemental Mercury (not in devices)		Pounds	
<b>Number</b> of mercury devices collected: Thermostats _____ Thermometers _____ Flow meters _____ Mercury switches _____			Name of vendor(s) who removed mercury waste and mercury containing items (note if separate contractors): _____

1. What type of CRT/Electronics Collection Program does your municipality sponsor: ☐Curbside ☐Drop-off ☐Both  
☐Special Event ☐No Program

2. Is there a fee associated with this collection? ☐Yes ☐No

3. If you answered “yes” to question #2, please enter the range of the fees charged (i.e. \$5-\$15): \$ \_\_\_\_\_ to \$ \_\_\_\_\_

**Section 7 - Signature of Municipal Official**

It is important that this information is accurate. Please sign to indicate that you have reviewed this data and so that we may contact you with any questions.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone: \_\_\_\_\_